



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/01/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERs NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	1-414-443-0000	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:
Hays Companies of Wisconsin, Inc.  1200 North Mayfair Road, Suite 100  Milwaukee, WI 53226		INSURER(S) AFFORDING COVERAGE INSURER A: NATIONAL FIRE & MARINE INS CO NAIC # 20079
INSURED HBT of Winters Highlands LLC  11060 White Rock Road Suite 150 Rancho Cordova, CA 95670		INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

## COVERAGEs

CERTIFICATE NUMBER: 55290817

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X		42-HBL-100809-01	03/01/17	03/01/19	EACH OCCURRENCE	\$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence)						\$ 100,000	
	MED EXP (Any one person)						\$	
	PERSONAL & ADV INJURY						\$ 1,000,000	
	GENERAL AGGREGATE						\$ 2,000,000	
	PRODUCTS - COMP/OP AGG						\$ 2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO- JECT <input checked="" type="checkbox"/> LOC OTHER:								
AUTOMOBILE LIABILITY  ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY							COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
UMBRELLA LIAB EXCESS LIAB							EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below				Y / N N / A			PER STATUTE	OTHR-
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Winters Highlands Subdivision - Public Improvement and Maintenance Agreement - Sewer and Storm Drain Improvements, Dated 6/8/2017; Subdivision Improvement and Maintenance Agreement - On-Site Public Improvements, Phase 1 Dated 6/8/2017; Subdivision Improvement and Maintenance Agreement - On-Site Public Improvements, Phase1A Dated 12/18/2018; City of Winters, its elective and appointive boards, commissions, officers, agents, consultants and employees are included as an Additional Insureds to the extent required by written contract. The General Liability policy is primary to and not in excess of or contributory with any other insurance available to City of Winters. Should the general liability policy be cancelled, other than for non-payment, before the expiration date thereof, 30 days advance notice

## CERTIFICATE HOLDER

## CANCELLATION

City of Winters Attn: City Manager  318 First Street  Winters, CA 95694	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  

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## ADDITIONAL REMARKS SCHEDULE

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AGENCY Hays Companies of Wisconsin, Inc.		NAMED INSURED HBT of Winters Highlands LLC
POLICY NUMBER		11060 White Rock Road Suite 150 Rancho Cordova, CA 95670
CARRIER	NAIC CODE	EFFECTIVE DATE:

### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: \_\_\_\_\_ FORM TITLE: \_\_\_\_\_

of cancellation will be delivered to certificate holders in accordance with the policy endorsements.

Policy Self Insured Retentions:

\$100,000 Each Occurrence Bodily Injury  
 \$250,000 Each Occurrence Third Party Over Action  
 \$100,000 Each Offense Personal and Advertising Injury  
 \$100,000 Each Occurrence Property Damage, Premises and Ongoing Operations  
 \$500,000 Each Occurrence Property Damage, Completed Operations - Arizona  
 \$500,000 Each Occurrence Property Damage, Completed Operations - Hawaii  
 \$500,000 Each Occurrence Property Damage, Completed Operations - Central (Texas & Wisconsin)  
 \$750,000 Each Occurrence Property Damage, Completed Operations - Florida  
 \$750,000 Each Occurrence Property Damage, Completed Operations - California  
 \$1,500 Each Home or Common Element Property Damage, Completed Operations - Maintenance Self-Insured Retention

"Locations":

Arizona  
 California  
 Florida  
 Hawaii  
 Central (Texas & Wisconsin)